

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: TOUCHSTONE WEST BEND (310707)

Address: 1707 CARRIE LN, WEST BEND, WI 53095

License Status: REGULAR

Licensed/Certified/Registered 02/01/1999

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History

Survey ID: 0095477 **End Date:** 08/17/2005 **Type:** STANDARD **Purpose:** COMPLAINT/SELF REPORT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0093577 **End Date:** 10/15/2004 **Type:** STANDARD **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10008058 Served 11/09/2004

Deficiencies Cited
83.43(3)(b)1

Subject Area
TESTING BY SERVICE COMPANY

Compliance
Verified
08/31/2005

Corrected
Yes

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Complaint History

Date Complaint Received: 07/18/2005

Date Investigation Completed: 09/07/2005

Subject Area(s)

RESIDENT RIGHTS

Result

NOT SUBSTANTIATED

SOD #

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